



Mid North Coast  
Local Health District

# Darrundaygirr darruyaygam maabu-daariwaygam Girrwaanbigundi

Improving the health and wellbeing of Aboriginal People  
Aboriginal Health Strategic Framework 2024 - 2034



## Acknowledgement of Country

- ▶ **Ngiyalagay junga-ngarraynggi yaanga Birrbay, Janggadi, Gumbaynggirr gungangulam, Yaanga wajaada juuda julundi yaam Mid North Coast Local Health ngayinggi - Gumbaynggirr**

We acknowledge the Traditional Custodians of the land covered by the Mid North Coast Local Health District (MNCLHD), the Birpai, Dunghutti, Gumbaynggirr and Nganyaywana Nations.

- ▶ **Nyiyanang dhupiyn.gan, ngarratiyn barri, Gumbaynggirr-gutun, Birrbay-gutun, Dhanggati-gutun. Nga'angga barriya, MNCLHD nyinatiyn - Dhanggati**

- ▶ **Nyiirun dhanbaan-ngarrayn barray Gumbaynggirrguba, Dhanggatiguba, Birrbayguba. Wuyinga barrayga, MNCLHD yalawayn – Gathang (Birpai)**

We acknowledge country belonging to the Gumbaynggirr, the Birpai, Dunghutti and the Nganyaywana. On these lands, MNCLHD sits.



## Acknowledgements



### Connected Circles

#### Artwork by Lisa Kelly of Gumbaynggirr Country

Lisa Kelly is a proud Gumbaynggirr woman living in Urunga, within the beautiful Bellinger Valley.

The Artwork entitled Connected Circles represents the importance of providing a culturally safe space for all people during their care or when visiting our hospitals.

### Translations

Muurrbay Aboriginal Language and Culture Co-operative has undertaken linguistic work to inform the Framework, which involved liaising with local Aboriginal people.

Thanks to the Muurrbay team for their translation work, especially Brother Steve Morelli (Gumbaynggirr translations). Thanks also to Uncle Gary Williams (Gumbaynggirr), Aunty Caroline Bradshaw (Dunghutti), Aunty Rhonda Radley (Birpai) and Uncle Bob Smith (Dunghutti).

### The Framework's use of the term Aboriginal

The term Aboriginal has been used throughout this Framework and is inclusive of Aboriginal and Torres Strait Islander people.

### Cultural sensitivity notice

Please be aware that this publication/resource may contain the names, images and/or voices of Aboriginal and Torres Strait Islander people who have died.



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**Jirray Girrwaanbi-yu  
nyayagi  
darruyaygam-gundi**

## Aboriginal People's perspective of health

🔊 **Girrwaanbi-gundi darruyaygam yaam yirraay:**

🔊 **Biyagay buurrgi-girr wadanyundi darruyay, gala girrwa wumaagaw darruyay gawbarrigam-ba, mabuula, guunu-warluunyja, yaamandi garlugun waarru wagin guuyuway-gi. Yilaana yarranganga waadu wagin darrunday girrwaagundi darruyaygam. Ngiyalagay yaam yirringin nyayagi: Yaam guunu-wumaagaw-gundi yaamandi yidaa wanggalay gunuugu-waaligamgu-gunuugu. (Gumbaynggirr)**

“Aboriginal health means not just the physical wellbeing of an individual but refers to the social, emotional and cultural wellbeing of the whole community in which each individual is able to achieve their full potential as a human being thereby bringing about the total wellbeing of their community. It is a whole-of-life view and includes the cyclical concept of life-death-life.” National Aboriginal Health Strategy.

🔊 **Ngaanbiyn gagil marrung marinda, marrayga, ngarralda. Nganbiyn duumuliliyn gagi ginyaanggang, marrunggang, dhanbaan.gang - Gathang.**

Gathang: Everybody (community) being well in body, in spirit and in knowledge. Everybody caring for each other to be happy, healthy and strong.

🔊 **Wutu marrunggan, gudhurrgan magiya, dhimbuyndha. Wunggatiyn waadhuga wutugu - Dhanggati**

Dhanggati: Everybody being well, being strong in body, in spirit. Working as one for all.



# MNCLHD Aboriginal Health Statement of Commitment

Mid North Coast Local Health District acknowledges the Aboriginal people as the traditional owners and custodians of this land. We also acknowledge and regret the wrongs of historical policies and actions that negatively impacted Aboriginal people in the past and we acknowledge the continued impact on Aboriginal people in our communities.

By acknowledging past wrongs and working together to build strong relationships, we hope to create a healthier, more respectful and effective health service that provides for community needs and closes the gap between Aboriginal and non-Aboriginal health and social outcomes.

Every family and community have their own story and we are committed to working together with Aboriginal people and communities to ensure that future stories are positive.

## We aim to:

- create positive and honest relationships with Aboriginal people in our communities that focus on improving health outcomes, with the understanding that this will lead to a greater quality of life for Aboriginal people
- provide a health system that Aboriginal people find readily accessible and culturally safe
- support Aboriginal people to build resilience, capacity and self-determination.

We commit to applying the following principles in everything we do:

### Valuing Aboriginal Culture

We recognise the cultural values and traditions of Aboriginal communities. We value the unique contribution of our Aboriginal staff and all our services are culturally appropriate.

### Equity in Healthcare

We recognise that sections of the Aboriginal community experience poor healthcare outcomes compared to non-Aboriginal people, and we strive to close the gap.

### Holistic Approaches

We acknowledge that Aboriginal Health encompasses not just the physical wellbeing of an individual but the social, emotional and cultural wellbeing of individuals, families and the community.

### Real Community Engagement

The voice of Aboriginal people is at the centre of everything we do and anything we do, we do with Aboriginal people and not to Aboriginal people. We involve Aboriginal people as early as possible in planning, designing, implementing and evaluating our services.

### Genuine Partnerships

We plan, collaborate and work with our partners to meet the needs of Aboriginal communities. We ensure we complement and do not duplicate services and programs. We engage as early as possible with our partners to plan and respond to the needs of our Aboriginal communities.

### Strong Leadership

The District's senior leadership team is committed to and prioritises 'Closing the Gap'. All our leaders model cultural competence and are committed to championing the delivery of culturally safe services and work environments for Aboriginal people.



# Message from the MNCLHD Governing Board Chair and Chief Executive



Peter Treseder AO  
Chair Governing Board



Stewart Dowrick  
Chief Executive

We are pleased to present the Mid North Coast Local Health District (MNCLHD) Aboriginal Health Strategic Framework 2024-2034. This forms the foundations for our renewed promise to our Aboriginal communities and reconfirms Aboriginal health as a priority of the MNCLHD.

**We aspire to be a leader for Aboriginal health and the most successful local health district in delivering real change and better outcomes for Aboriginal people across all measures.** To achieve this, we must be committed at every level, challenge ourselves to do better and be accountable to our Aboriginal communities.

Our Aboriginal communities are not only at the heart of our thinking but have been active participants in designing this important way forward. The Framework is centred upon our journey together to improve the wellbeing of our communities. It sets out ways we can work together to ensure we have a shared understanding of what a healthier future looks like for Aboriginal people.

We promise to:

- fulfill our Statement of Commitment
- be unyielding in our pursuit to achieve substantial change that is relevant and meaningful
- provide culturally safe, secure and accessible services for all Aboriginal people
- take a strong stance against racism and ensure all our team members understand the harm that experiences of racism cause for Aboriginal people. We will adopt a zero-tolerance approach for racism and embed culturally appropriate policies and processes to ensure a safe environment for all.

During the consultation for this Framework, we heard how important it is for us to work with our partners in the Aboriginal Community Controlled Health Services (ACCHS) and the Primary Health Network. We will continue to build on these established relationships.

The Framework aims to ensure that improvements in the wellbeing of Aboriginal people is embedded in everything we do and that all parts of our organisation from the Governing Board through to every ward and community service, takes action that delivers better outcomes, ensures accessible services and optimal healthcare experiences for Aboriginal people.

We are proud of our Aboriginal team members and recognise the unique cultural knowledge, skills and connections they bring to our local health district. We want our staff to thrive and grow to reach their full potential. We also want to see this workforce grow in numbers and strength to reflect the communities we serve.

We take seriously our responsibility to support economic growth and development for Aboriginal communities and will continue to look for opportunities to work with Aboriginal businesses and individuals.

We sincerely thank everyone who contributed to the various stages in the development of this Framework and extend that thanks to the entire MNCLHD team who remain committed to improving the health and wellbeing of our communities.

**Peter Treseder AO**  
Chair - Governing Board

**Stewart Dowrick**  
Chief Executive





# Our Partners







**Healthy North Coast Primary Health Network**

Healthy North Coast is committed to Aboriginal health and provides programs in Coordinated Care and Supplementary Services, Closing the Gap and an ongoing commitment to the Aboriginal community through a range of innovative programs.

**Phone: 02 6659 1800**  
**Address: Suite 2 Level 1**  
**30 Gordon Street**  
**Coffs Harbour 2450**

**Galambila Aboriginal Health Service**

Galambila Aboriginal Health Service is a community-controlled health organisation that provides primary health care to Aboriginal Peoples living on Gumbaynggirr land in Coffs Harbour and Bellingen LGAs.

At Galambila we provide wholistic health care through a range of clinical programs and services with the purpose of 'strengthening the health and wellbeing of our community by providing culturally appropriate quality care'.

**Phone: 02 6652 0800**  
**Address: 9 Boambee Street**  
**Coffs Harbour 2450**

**Our Partners**

MNCLHD is committed to working in partnership with Aboriginal people, other government agencies and local Aboriginal Community Controlled Health Services (ACCHS).

We know that effective partnerships with ACCHS are fundamental for improving health and wellbeing for Aboriginal people in our region and will ensure the expertise

and experience of Aboriginal communities is represented in a broad range of health care processes and decisions.

We also know that it is essential that our partnerships are meaningful and driven by the community priorities and needs.

Through our Framework, we will continue to build on the work we have done with our partners and will strengthen our collaborative efforts to achieve better outcomes for all Aboriginal people.

**Durri Aboriginal Corporation Medical Service**

Durri Aboriginal Corporation Medical Service strives to make a difference in the health outcomes of the Aboriginal and Torres Strait Islander communities it serves by providing a culturally appropriate and holistic primary health care service in the Macleay and Nambucca valleys.

**Phone: 02 6560 2300**  
**Address: 15-19 York Lane**  
**Kempsey 2440**

**Werin Aboriginal Corporation Medical Service**

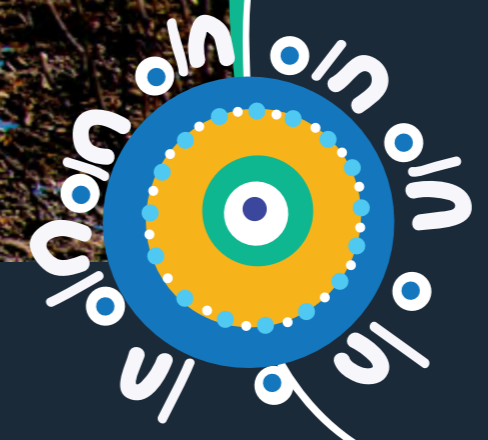
Werin is an Aboriginal Medical clinic committed to providing culturally appropriate, holistic health and wellbeing services for Aboriginal people in the Port Macquarie region.

**Phone: 02 6589 4000**  
**Address: 14 Lake Road**  
**Port Macquarie 2444**





# The Strategic Framework







# The Strategic Framework



This Framework guides how we plan, implement and evaluate our actions to ensure they are culturally safe, appropriate and effective. The Framework is aligned with the MNCLHD Strategic Plan 2022-2032 and links with other important policies and directions.



The Framework uses the views and voices of our Aboriginal team members, partners and community members to highlight why this Framework is so important and shares insights we all need to consider when undertaking our work to improve Aboriginal health and wellbeing.



Under each Focus Area, we outline our District responsibilities that every part of the organisation must contribute towards.



Strategic Objectives for each Focus Area summarise our main intentions.



Statements outlining what success looks like are included for each strategic objective. They demonstrate the standards we want to achieve.



Taking action is critical if we are to succeed. There are some key action ideas included for each Focus Area. These can be used as they are or adapted to suit different work environments and team outcomes. Each team must consider the right actions for the outcomes they aim to achieve.



In addition to the elements above, the Framework includes selected whole of District key outcomes and targets so we can monitor our progress at the Governing Board and District levels.





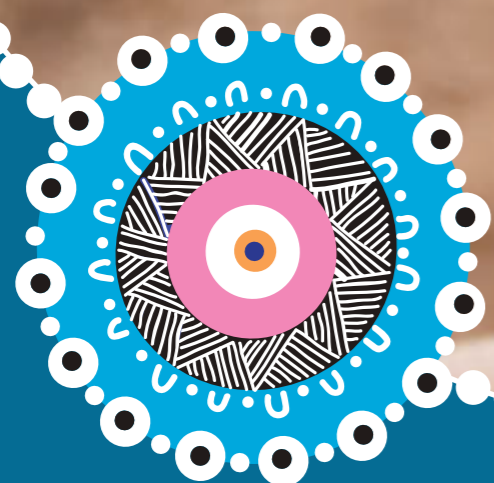




# Outcomes and targets







## Some key changes we want to see over the next 10 years: Outcomes and targets

We are committed to achieving real outcomes to improve the health and wellbeing of Aboriginal people over the next 10 years and have set targets so we can monitor our progress.

These outcomes and targets are aligned with state and national directions for Closing the Gap, the NSW Health Aboriginal Health Plan and are informed by the Aboriginal Health and Torres Strait Islander Health Performance Framework.

We also understand how important it is for us to remain responsive to our community's needs and appreciate that these can change over time.

We will be agile and ensure that we adopt new and contemporary approaches over the life of the Framework.

These will need to be reflected in our outcomes and targets and the intensification approach we take.





**Outcome 1: We have culturally safe services and Aboriginal people are true partners in decisions about their care**

Outcomes and measures	Where we are now	Where we will be in 10 years
1.1 Aboriginal people report 'good' or 'very good' care while in hospital	93.3% (Aboriginal) 95% (non-Aboriginal)	98% (Aboriginal)
1.2 Increased proportion of Aboriginal people complete their inpatient care	98.5% (Aboriginal) 99.3% (non-Aboriginal)	100% (Aboriginal)
1.3 Increase the number of Aboriginal people who complete their emergency department attendance	92.6% (Aboriginal) 95.7% (non-Aboriginal)	100% (Aboriginal)



**Outcome 2: Aboriginal people enjoy long and healthy lives**

Outcomes and measures	Where we are now	Where we will be in 10 years
2.1 Reduce the rate of premature mortality for Aboriginal residents aged 0-64 years per 100,000 (ASR):	2011-2015 NSW 343.1(Aboriginal)	Rate per 100,000
Kempsey Aboriginal Region	618.9 (Aboriginal) 220.4 (non-Aboriginal)	343 (Aboriginal)
Coffs-Nambucca Aboriginal Region	287.2 (Aboriginal) 211.1 (non-Aboriginal)	210 (Aboriginal)
Port Macquarie Hastings Aboriginal Region	224.6 (Aboriginal) 191.8 (non-Aboriginal)	190 (Aboriginal)



**Outcome 3: Aboriginal children are born healthy and strong and thrive in the early years**

Outcomes and measures	Where we are now	Where we will be in 10 years
3.1 Increase the proportion of Aboriginal babies with a healthy birthweight	88.3% (Aboriginal) 94.5% (non-Aboriginal)	95% (Aboriginal)
3.2 Aboriginal children undergoing otitis media procedure	3	Annual target 43
3.3 Childhood immunisation rates at one year achieved	93.2% (Aboriginal) 92.6% (non-Aboriginal)	98% (Aboriginal)
3.4 Childhood immunisation rates at five years achieved	94.9% (Aboriginal) 92.6% (non-Aboriginal)	98% (Aboriginal)
3.5 Reduce the proportion of Aboriginal children in Out of Home Care - more children with their families	58.3% (268 Aboriginal) 42% (192 non-Aboriginal)	<49% (Aboriginal or <225)



**Outcome 4: Aboriginal people access the care they need early and experience better outcomes**

Outcomes and measures	Where we are now	Where we will be in 10 years
4.1 Increase cancer screening rates to detect cancer early - increase breast screening for Aboriginal women aged 50-74 (consider screening for other cancer types)	49.4% (Aboriginal) 56.9% (non-Aboriginal)	60% (Aboriginal)
4.2 Improved access to specialist services for management, follow-up and prevention of health conditions for Aboriginal people	Access and review data on access to specialist services for Aboriginal people completed	% Increase in Aboriginal people accessing specialist services





**Outcome 5: We focus on prevention and support Aboriginal people to stay healthy**

Outcomes and measures	Where we are now	Where we will be in 10 years
5.1 More Aboriginal people with healthy weight, better nutrition, more physical activity, lower blood pressure and lower cholesterol	Note: Data from PHIDU	Improve by 10%
5.1.1 % of Aboriginal adults within the healthy weight range	Kempsey 71.8%, PMQ-Hastings: 73.2%, Coffs-Nambucca: 70.2%	Improve number of Aboriginal people within healthy weight range in each LGA by 10%
5.2 Fewer Aboriginal adults smoking	Kempsey: 51.4%, PMQ-Hastings: 38.2%, Coffs-Nambucca: 41.8%	Reduce number of daily smokers in each LGA by 10%



**Outcome 6: Aboriginal people experience improved mental health, social and emotional wellbeing**

Outcomes and measures	Where we are now	Where we will be in 10 years
6.1 Increase social and emotional support for Aboriginal people in the community, closer to home, with more Aboriginal people followed up within seven days of an acute discharge	67% (Aboriginal) 75.7%(non-Aboriginal)	80% (Aboriginal)
6.2 Significant and sustained reduction in suicide of Aboriginal people towards zero	Access and review available data	Towards zero



**Outcome 7: We have culturally safe and supportive work environments**

Outcomes and measures	Where we are now	Where we will be in 10 years
7.1 Aboriginal workforce participation - increase Aboriginal workforce as a proportion of the total workforce at all salary levels (bands) and occupations (%)	5.4%	7% (or same as population)
7.2 Reduced experiences of racism reported, leading to zero experiences in the workplace (PMES Survey)	32.6%	80% reduction



**Outcome 8: We have strong and effective partnerships that focus on the needs of the Aboriginal communities**

Outcomes and measures	Where we are now	Where we will be in 10 years
8.1 We regularly review our partnerships to ensure they are meeting the partnership objectives and outcomes for the community	Partnership review undertaken. Other effective measures to be identified in time	Recommendation from the 2023 Partnership Review implemented



## Consumer and Community Perspective

### Focus Area 1

- 🔊 **Junga-junaaygam, ngarraangaygirr , balmuunambang, girrwa-gundi**  
(Informed, engaged, empowered community)

Informed, involved Aboriginal consumers and communities that guide our development

- 🔊 **Miyang nyiyanang nhayan, miyang nyiyanang guuyan – Dhanggati**  
(Our view, our voice – what we see, what we say)







WHAT SUCCESS LOOKS LIKE

KEY ACTION IDEAS

## Focus Area 1

We want to see real change that enables our communities to thrive and supports our health and wellbeing. We need to know where and how to access health services and have easy to read information that allows us to choose the best options for us and our families.

We have a rich culture and want to share this so it is reflected in the services and programs we use. Take time to talk to us and listen to what we have to say so that together we can build a culturally safe health system for everyone.

## Our District responsibilities

- Build knowledge and understanding of the needs of our Aboriginal consumers and communities.
- Ensure we know what sorts of information would be useful and make culturally appropriate information accessible for Aboriginal people.
- Provide culturally appropriate communication with Aboriginal clients and their families, enabling participation in decisions about their care.
- Effectively involve our Aboriginal community and consumers when we are designing, delivering and evaluating our services and programs.

## Making it happen

What actions do you need to prioritise in the next 12 months to meet your responsibilities and contribute to an informed, engaged and empowered Aboriginal community?

“Enhance community pride through reflecting and representing the importance of Aboriginal culture.” (Consultation comment)

## Strategic Alignment

National Agreement on Closing the Gap: Priority Reform 1, National Aboriginal and Torres Strait Islander Health Plan: Priority 1, NSW Aboriginal Health Plan: Priority Reform 1, Strategic Direction 2, MNCLHD Strategic Plan 2022-2032: Focus Area 1.

### Strategic Objective: 1.1 Our community is aware and informed about our services, achievements and challenges

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>“ Aboriginal people understand the health system and ways to improve their own health</li> <li>“ The Aboriginal community is reflected and represented in our communications</li> <li>“ Achievements in Aboriginal health are celebrated and shared</li> <li>“ Our communications with the Aboriginal community reflect and represent them</li> </ul> | <ul style="list-style-type: none"> <li>“ Ensure up-to-date, relevant information about health services and supports are readily available to consumers and the Aboriginal community</li> <li>“ Co-design with ACCHS and the community to develop and deliver health literacy information and programs tailored to Aboriginal people, families and communities</li> </ul> |
|--|--|

### Strategic Objective: 1.2 Consumers and carers as partners in care through open, clear and timely communication and shared decision making

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>“ Staff always communicate in a culturally safe and respectful way</li> <li>“ Aboriginal consumers and carers have the knowledge and confidence to manage their care</li> <li>“ Information is explained clearly and each person’s needs and preferences are understood</li> <li>“ We involve Aboriginal people in care decisions and enable the inclusion of family members</li> <li>“ Culturally appropriate resources and information materials, including brochures, posters etc. are available and well-used</li> </ul> | <ul style="list-style-type: none"> <li>“ Offer learning and development that builds team member knowledge and skills in effective interpersonal communication and engagement with Aboriginal people</li> <li>“ Consider the best methods to share information with and receive feedback from Aboriginal consumers and carers</li> </ul> |
|---|---|

### Strategic Objective: 1.3 Genuine community engagement and partnering

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>“ Trust is built through ongoing relationships with Aboriginal people</li> <li>“ Broad engagement occurs to ensure the Aboriginal consumer voice is central to our thinking and the needs of Aboriginal people and groups are considered</li> <li>“ We recognise and draw on the expertise of our Aboriginal employees when seeking to engage with Aboriginal communities</li> <li>“ We are accountable and provide feedback to the community on what we have heard and what we are doing about it</li> </ul> | <ul style="list-style-type: none"> <li>“ Implement strategies to support and empower Aboriginal community and consumer advocates and representatives to participate effectively</li> <li>“ Ensure Aboriginal Health Impact Statements are used in all service change activities</li> <li>“ Co-design with Aboriginal communities and consumers in developing and evaluating our services and consolidating learning for implementation</li> </ul> |
|--|---|



## Consumer and Community Perspective

### Focus Area 2

- ▶ **Maabu-darrundaygam dugu-mabi**  
(Positive and personalised care experiences)

Trusted, seamless, consistent, effective, safe care that meets Aboriginal patients' needs

- ▶ **Minya nyiirun nyaayn, minya nyiirun djuayn - Gathang**  
(Our view, our voice – what we see, what we say)







WHAT SUCCESS LOOKS LIKE

KEY ACTION IDEAS

**Focus Area 2**

We want to feel safe, welcomed and have our culture respected when we use health services. Accessing healthcare can sometimes be difficult for us especially when it costs a lot, we have to travel far and we have had poor experiences before. We can overcome these barriers by being involved in developing services closer to home that are culturally welcoming.

There are many factors we consider when making decisions about our care and it's important that healthcare providers hear our individual concerns and preferences.

Our families play an important role in supporting our healthcare and we must be able to involve them when we choose.

We need support when we leave the hospital to make sure we can go to the right services so we can get well and stay healthy in our community.

**Strategic Objective: 2.1 Kind, respectful and welcoming services**

-  Staff communicate in a culturally safe and respectful way that is trauma-informed and meets individual needs

 Our care environments are designed and presented in ways that ensure Aboriginal people feel welcome


 Aboriginal patients are supported to involve immediate and extended family members in their care experiences


 Aboriginal patients and families have access to advocates, including access to an Aboriginal team member


 Incorporate Aboriginal art and symbols throughout our facilities and in other ways, such as on equipment and clothing


 Develop a system to ensure we routinely seek information on family connections and how they may be involved in an individual's care


**Strategic Objective: 2.2 Ease and equity of access to quality services, according to need**

-  Ensure all our services are available, affordable and accessible for Aboriginal people

 We identify and take steps to reduce or overcome barriers to access and provide services as close as possible to where Aboriginal people live

 We proactively support Aboriginal patients who need to travel to access higher-level services to ensure barriers such as transport and accommodation (for patient and family) are resolved

 In collaboration with our partners, offer outreach services to isolated communities, including general and specialist services

 Explore different models to address financial barriers that prevent Aboriginal people from accessing the care they need, e.g., support for the Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS), access to public specialist services





## Our District Responsibilities

- Provide culturally safe and welcoming services for Aboriginal people.
- Ensure Aboriginal people are always treated with respect and kindness.
- Understand barriers and ensure our services are easily accessible for Aboriginal people.
- Ensure smooth transitions, referrals, options and pathways to follow-up care for Aboriginal people.
- Develop and invest in models of care that effectively meet the needs of Aboriginal people.

## Making it happen

What actions do you need to prioritise in the next 12 months to meet your responsibilities and contribute to positive and personalised care experiences for Aboriginal people?

“Don’t talk down to us. If you come across as too cocky, it seems like you’re trying to make us feel dumb.” (Consultation comment)

## Strategic Alignment

National Aboriginal and Torres Strait Islander Health Plan: Priority Area 1 and 9, NSW Aboriginal Health Plan: Strategic Direction 2, MNCLHD Strategic Plan: 2022-2032 Focus Area 2.

### WHAT SUCCESS LOOKS LIKE

### KEY ACTION IDEAS

#### Strategic Objective: 2.3 Connected, integrated care with seamless transitions across the continuum and between providers

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>“ We partner with other providers to enhance discharge, follow-up and referral processes for Aboriginal clients</li> <li>“ We have ways to assist Aboriginal clients with navigating their care journey</li> <li>“ We offer opportunities to involve extended family in care planning and will shape the plan around what will work</li> </ul> | <ul style="list-style-type: none"> <li>“ Consider ways to provide culturally safe and supported care navigation for Aboriginal patients</li> <li>“ Develop a strategy for promoting knowledge of community-based services and pathways in acute settings</li> </ul> |
|---|---|

#### Strategic Objective: 2.4 Innovative models of care and reorientation to balance acute, community and home-based care

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>“ We strive for holistic models of care that are patient-focused, not illness-focused</li> <li>“ Good examples of new models of care for Aboriginal people are shared and spread</li> <li>“ We take opportunities for shared service delivery models with our partners</li> <li>“ We look for ways to deliver mobile options that take services to the communities and on Country in a flexible way</li> </ul> | <ul style="list-style-type: none"> <li>“ Find ways to provide access to space and technology close to home for Aboriginal patient to participate in virtual care (e.g., community hubs to access the internet for consultations)</li> </ul> |
|---|---|



## Consumer and Community Perspective

### Focus Area 3

- ▶ **Gulambaygam daariway, darrundaygam gurrubal**  
(Strong prevention and early intervention)

Promoting wellness for Aboriginal people, protecting the Aboriginal population, addressing risk factors

- ▶ **Miyang nyiyanang nhayan, miyang nyiyanang guuyan – Dhanggati**  
(Our view, our voice – what we see, what we say)







WHAT SUCCESS LOOKS LIKE

KEY ACTION IDEAS

**Focus Area 3**

We have a holistic view of health and want our communities and families to be healthy and live longer. We see a lot of chronic diseases in our people and want this to change.

By working together, we can design programs and services that Aboriginal people feel safe to use, which promote good health, keep us safe and prevent chronic disease in our younger people.

**Strategic Objective: 3.1 Closing the gap, tackling disadvantage**

- We are leaders in driving change and creating opportunities to improve the health and wellbeing of our Aboriginal communities
- We recognise the impact of socioeconomic factors and take a holistic approach to improving economic prosperity and health equity for Aboriginal people and communities
- We have highly effective, evidence based programs designed to meet the needs of Aboriginal people
- Our efforts are sustained and we continue our investment in things that are working

- Consult with Aboriginal communities on key health concerns and the types of services and programs to prioritise
- Share, spread and scale evidence-based programs for improving Aboriginal health and wellbeing that are working

**Strategic Objective: 3.2 Strong health protection and disaster preparedness and response**

- We ensure our health protection services and programs are accessible and effective for Aboriginal communities
- We work with Aboriginal staff, communities and organisations and other partners to create healthy environments and spread messages and activities that support and maintain good health
- We take time to consider and develop appropriate strategies on how best to support Aboriginal communities to prepare for and respond to natural disasters, epidemics and other emergency events

- Identify and work with local Aboriginal champions in communities to inform program and service development and assist in encouraging and supporting participation
- Work holistically with other agencies to enhance living environments for disadvantaged Aboriginal families
- Develop disaster plans and protocols with our ACCHS partners for supporting Aboriginal communities





## Our District Responsibilities

- Demonstrate unwavering commitment, be proactive, and achieve real progress in closing the gap.
- Partner with Aboriginal people and organisations to design, deliver and evaluate health protection, health promotion and early intervention programs and services.
- Ensure all our programs and services are evidence-based and culturally appropriate.

## Making it happen

What actions do you need to prioritise in the next 12 months to meet your responsibilities and contribute to keeping Aboriginal people healthy?

“When it comes to health services, children should be given priority since we have a young population and it’s too late when they’re old like us because we already have heart problems.”  
(Consultation comment)

## Strategic Alignment

National Agreement on Closing the Gap: Priority Reform 1 and 2, National Aboriginal and Torres Strait Islander Health Plan: Priority Area 1, 4, 5, 6, 7 and 9, NSW Aboriginal Health Plan: Priority 4 and Strategic Direction 3 and 4, MNCLHD Strategic Plan 2022-2032: Focus Area 3.

### WHAT SUCCESS LOOKS LIKE

### KEY ACTION IDEAS

#### Strategic Objective: 3.3 Improved health and wellbeing in the community, healthy environments and behaviours

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>● We provide a range of health promotion and education programs tailored to the needs of Aboriginal people</li> <li>● We partner with Aboriginal people and organisations to ensure our health promotion programs are effective</li> <li>● We take a strength-based approach that empowers Aboriginal people to make healthier lifestyle choices</li> <li>● We work with Aboriginal communities, housing support services and relevant stakeholders to develop strategies that enhance healthy, livable and safe environments</li> </ul> | <ul style="list-style-type: none"> <li>● Identify and work with local Aboriginal champions in communities to inform program and service development and assist in encouraging and supporting participation</li> </ul> |
|---|---|

#### Strategic Objective: 3.4 Early intervention to address risk factors

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>● We use a range of strategies to identify Aboriginal people at risk of or with undiagnosed illnesses</li> <li>● We find ways to initiate care early in the course of disease, improve health and address any barriers</li> <li>● We have clear pathways for referrals to screening and early intervention programs</li> </ul> | <ul style="list-style-type: none"> <li>● Ensure that prevention and early intervention services and programs are well-known in the Aboriginal community so they can access them when needed</li> <li>● Build the capacity of partners in prevention and early intervention strategies</li> <li>● Develop procedures/protocols to incorporate opportunistic early intervention and follow-up</li> </ul> |
|---|--|





## Internal Process Perspective

### Focus Area 4

- 🔊 **Ngalan-yanaaygam, ngalan-barriyaygam, gayirrigam**  
(Partnering, collaboration, communication)

Respectful, systematic, effective, empowering and enduring

- 🔊 **Minya nyiirun nyaayn, minya nyiirun djuyayn - Gathang**  
(Our view, our voice – what we see, what we say)





WHAT SUCCESS LOOKS LIKE

KEY ACTION IDEAS

## Focus Area 4

To improve the health and wellbeing of Aboriginal people and communities, it is critical to have strong partnerships that leverage the expertise of all and align efforts to achieve the best results. We access many different services to support our health and it is better for us when people work together to make sure all our needs are considered.

As Aboriginal team members, we have a lot to contribute and bring a unique set of skills and cultural knowledge that can guide how we engage with and respond to the needs of our Aboriginal communities. It is important that the responsibility to achieve better outcomes for Aboriginal people involves a whole of organisation approach, where Aboriginal health remains a priority across all our teams.

## Our District Responsibilities

- Build, maintain and support strong partnerships for Aboriginal health, based on self-determination and shared decision-making.
- Fulfill our commitment to working actively with our partners and delivering outcomes.
- Incorporate cultural knowledge and approaches into our services by strengthening the voice of Aboriginal team members.
- Effective and regular communication that keeps Aboriginal health on the agenda and ensures all parts of the organisation are aware, informed and held accountable for their contributions.

## Making it happen

What actions do you need to prioritise in the next 12 months to meet your responsibilities and contribute to better partnering, collaboration and communication to support better health care and health outcomes for Aboriginal people?

## Strategic Alignment

National Agreement on Closing the Gap: Priority Reform 1 and 2, National Aboriginal and Torres Strait Islander Health Plan: Priority Area 1 and 2, NSW Aboriginal Health Plan: Priority Area 1 and 2, MNCLHD Strategic Plan 2022-2032: Focus Area 4.

### Strategic Objective: 4.1 Effective collaboration with external partners

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>“ We have meaningful partnerships that are mutually beneficial and based on meeting the needs of our Aboriginal communities</li> <li>“ We recognise the expertise of our partners and actively seek their feedback and advice</li> <li>“ We share leadership and decision-making on priorities, work together and pool resources appropriately</li> <li>“ We value the work of ACCHS and take opportunities to actively support their growth and development</li> <li>“ All employees are aware of the partnerships we have with Aboriginal organisations and understand their responsibilities in enacting the LHD’s partnership commitments</li> <li>“ We develop streamlined processes for better operational connections between organisations</li> </ul> | <ul style="list-style-type: none"> <li>“ Strengthen, sustain and regularly evaluate the formal partnerships with ACCHSs (Aboriginal Health Accord)</li> <li>“ Strengthen, sustain and regularly evaluate Operational Partnerships with ACCHSs</li> <li>“ Explore opportunities for different service delivery models with ACCHS partners, such as outreach, in-reach, co-location and contracting</li> <li>“ Create opportunities for team members from our partner organisations to visit our facilities and services, such as through staff exchanges to foster greater understanding and respect between different organisations</li> </ul> |
|--|--|

### Strategic Objective: 4.2 Effective integration, networking and multidisciplinary teamwork across and beyond the organisation

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|---|--|
| <ul style="list-style-type: none"> <li>“ We have structures and systems that facilitate effective networking and opportunities to build understanding between providers around issues important to Aboriginal health and wellbeing</li> <li>“ Our Aboriginal colleagues are valued as key members of our multidisciplinary teams</li> <li>“ We value and make time for team members to participate in collaborative activities and cross-cultural teamwork</li> </ul> | <ul style="list-style-type: none"> <li>“ Increase the number of Aboriginal staff in case management roles</li> <li>“ Introduce a buddy system where staff work together and cultural input is valued in the clinical setting</li> <li>“ Integrate Aboriginal Health Practitioner roles in our services as part of multidisciplinary teams</li> </ul> |
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### Strategic Objective: 4.3 Strong and effective internal communication and accountability

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|---|---|
| <ul style="list-style-type: none"> <li>“ All our communications about Aboriginal Health and with Aboriginal people are culturally respectful</li> <li>“ Our Aboriginal team members feel their voice is heard</li> <li>“ All staff in the organisation are fully aware of our commitment to improving Aboriginal health and understand how they can contribute to closing the gap</li> <li>“ We are open and accountable about our progress in achieving our goals and regularly share our achievements and challenges throughout the organisation</li> </ul> | <ul style="list-style-type: none"> <li>“ Track and share progress and outcomes of projects targeting improvements in Aboriginal health, with a view to spreading good ideas and scaling effective strategies</li> <li>“ Promote our Aboriginal team members internally and externally to create broader connections, share ideas and build strengths</li> </ul> |
|---|---|





## Internal Process Perspective

### Focus Area 5

- 🔊 **Yaaway-gam nyarlaan, yaamandi ngalanambay daalbirrwirr, ngirraygam darray-wunba.**  
(Streamlined processes that support safety and best practice)

Culturally appropriate, integrated, innovative systems that support continuous quality improvement and address the needs of Aboriginal people

- 🔊 **Miyang nyiyanang nhayan, miyang nyiyanang guuyan – Dhanggati**  
(Our view, our voice – what we see, what we say)





WHAT SUCCESS LOOKS LIKE

KEY ACTION IDEAS

## Focus Area 5

We want to receive safe and effective care in local hospitals so we can return home as soon as possible and be supported by programs and services in the community that are proven to work for us and meet our needs.

We want to be treated with cultural respect. It's important that health service policies, processes, and systems reflect culturally appropriate care and practices, and these are applied consistently by all team members.

## Our District Responsibilities

- Deliver safe, effective, evidence-based care that meets the needs of Aboriginal people.
- Meet Aboriginal specific actions as part of our accreditation requirements and continually improve our services for Aboriginal people.
- Have policies, processes and systems that are up-to-date, efficient, culturally safe and effectively support achievement of our goals for improving Aboriginal health and wellbeing.

## Making it happen

What actions do you need to prioritise in the next 12 months to meet your responsibilities and contribute to more effective processes and systems to support improvements in Aboriginal health?

## Strategic Alignment

National Agreement on Closing the Gap Priority: Reform 2 and 4, National Aboriginal and Torres Strait Islander Health Plan: Priority Areas 2, 10, 11, 12 NSW Aboriginal Health Plan: Priority Area 2 and 3, MNCLHD Strategic Plan 2022-2032: Focus Area 5.

### Strategic Objective: 5.1 Consistent, high quality, safe, effective, evidence-based care

- “ When reviewing data on clinical outcomes and other quality measures, we include analysis of any disparities by Aboriginality
- “ We actively ensure the MNCLHD’s safety and quality priorities address the specific health needs of Aboriginal people
- “ We make best use of our clinical governance systems to identify and act to ensure we provide effective and culturally safe services for Aboriginal people
- “ We use information from Aboriginal people’s feedback, complaints and patient stories to inform quality improvement
- “ We apply continuous quality improvement across all our Aboriginal health services and programs
- “ Regularly monitor progress on the National Safety and Quality Health Service Standards’ specific Aboriginal actions
- “ Provide a report on the safety and quality outcomes proving a comparison between Aboriginal and non-Aboriginal (every six months)

### Strategic Objective: 5.2 Effective, integrated systems for sharing patient information and supporting patient flows

- “ Our patient information systems are adapted to be more supportive and inclusive of Aboriginal health
- “ Our collection of Aboriginal status information is effective and complete. We have processes to routinely ask people if they identify as being of Aboriginal origin and to record this information in all administrative and clinical information systems
- “ Our information systems support effective, timely referrals and data sharing to enable smooth transitions of care and continuity of care between service providers
- “ Develop agreements with ACCHS and other partners to support relevant and appropriate information sharing while respecting data sovereignty for Aboriginal organisations and communities

### Strategic Objective: 5.3 Increased agility, flexibility and efficiency of corporate systems, processes and projects

- “ We proactively review our systems and processes to ensure they support cultural safety
- “ We have effective, culturally safe systems to receive, record and appropriately respond to complaints of racism against Aboriginal people
- “ Develop policies and systems that support flexibility in care of Aboriginal people, such as flexible hospital gate leave
- “ Seek feedback from Aboriginal team members for advice on the usability and appropriateness of current systems and processes





## Internal Process Perspective

### Focus Area 6

- ▶ **Ngaalgan.gundi jandaygam, darruyaygam-gundi miindal, mangga-mayungigirr**  
(Research, health intelligence, strategic management)

Building knowledge for best decisions

- ▶ **Minya nyiirun nyaayn, minya nyiirun djuyayn - Gathang**  
(Our view, our voice – what we see, what we say)





WHAT SUCCESS LOOKS LIKE

KEY ACTION IDEAS

## Focus Area 6

We have been the subject of a lot of research in the past and it's important that researchers build connections and trust with Aboriginal communities as a critical first step to undertaking any research. It is equally important to share research outcomes with us, so we know what comes of it.

The health service collects information from us every time we access services, it would be good to see how this information is used to provide better services and outcomes for Aboriginal people.

## Our District Responsibilities

- Support and initiate research that answers important questions to inform our actions in Aboriginal health in culturally appropriate ways.
- Ensure knowledge and evidence on what works in Aboriginal health is widely shared and learnings are applied across our services.
- Improve our collection and reporting of data and information to best inform decision-making that improves Aboriginal health and wellbeing.
- Regular outcome-focused and culturally informed planning and performance management that ensures we take strong steps to improve outcomes for Aboriginal people.

## Making it happen

What actions do you need to prioritise in the next 12 months to meet your responsibilities for effective research, health intelligence and strategic management that enables us to improve Aboriginal health and wellbeing?

## Strategic Alignment

National Agreement on Closing the Gap: Priority Reform 2, 3 and 4, National Aboriginal and Torres Strait Islander Health Plan: Priority Area 2, 11 and 12, NSW Aboriginal Health Plan: Priority Area 2 and 4 and 2 and Strategic Direction 5, MNCLHD Strategic Plan 2022-2032: Focus Area 6.

### Strategic Objective: 6.1 Research and knowledge translation focused on answering important service delivery questions

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>👣 We invest in Aboriginal research, evaluation and quality improvement, track progress and share findings</li> <li>👣 We support links between Aboriginal communities, service providers and tertiary institutions to facilitate appropriate research and education that meets community needs</li> <li>👣 We partner with ACCHS and others to co-design and undertake research that answers important questions and identifies emerging risks to guide future services and programs for Aboriginal health</li> <li>👣 We provide support to Aboriginal team members undertaking or participating in research</li> <li>👣 We actively seek evidence of proven effective strategies to support development of new approaches, programs and investments in Aboriginal health care delivery and share new research findings with partners and community</li> </ul> | <ul style="list-style-type: none"> <li>👣 Ensure partnership agreements and MOUs include opportunities to progress culturally appropriate research, evaluation, data and information sharing</li> <li>👣 Explore and implement ways to increase Aboriginal people's access and participation in clinical trials</li> <li>👣 Review and enhance systems for recording research and evaluation activities to enable reporting where they target or include Aboriginal people</li> </ul> |
|--|--|

### Strategic Objective: 6.2 Integrated approach to turn data into timely, meaningful information to support decisions

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|--|--|
| <ul style="list-style-type: none"> <li>👣 We utilise data and information related to Aboriginal health and social determinants that recognise needs, successes and opportunities for further improvement</li> <li>👣 We use a story-telling approach and work together with Aboriginal staff, partners, community to interpret and explain the meaning in our data on Aboriginal health</li> <li>👣 We upskill Aboriginal staff in collecting, interpreting and using data and information and involve them in designing reports that are meaningful and useful</li> <li>👣 We ensure data and reports are relevant to Aboriginal health and wellbeing and are available to all employees</li> </ul> | <ul style="list-style-type: none"> <li>👣 Regularly undertake data analysis and wherever possible compare results for Aboriginal and non-Aboriginal people to understand the drivers of outcomes more fully</li> <li>👣 Develop a suite of reports that gives ready access to timely, collated, interactive data and reports on Aboriginal health</li> </ul> |
|--|--|

### Strategic Objective: 6.3 Strong, effective, informed, outcome-focused planning and performance management

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>👣 We are committed to long term and sustainable action that will lead to real improvements in health and wellbeing of Aboriginal people in the Mid North Coast</li> <li>👣 We set priorities to be addressed, including targets, deliverables and accountabilities for success</li> <li>👣 We have formal and routine reporting to Governing Board, executive managers and teams on agreed Aboriginal health performance indicators and emerging issues and risks, that leads to strategic, solutions-focused discussions and actions</li> </ul> | <ul style="list-style-type: none"> <li>👣 Undertake place-based planning supported by clear information on where services are available, where patients are located and flowing, to identify gaps and consider service enhancements for Aboriginal health services</li> </ul> |
|---|--|





## Internal Capacity Perspective

### Focus Area 7

- ▶ **Warru-biin, guunu-warluuny, gulbul-ay-gam**  
(People, culture, and capability)

Values driven, right people in right roles to deliver our strategy

- ▶ **Miyang nyiyanang nhayan, miyang nyiyanang guuyan – Dhanggati**  
(Our view, our voice – what we see, what we say)







WHAT SUCCESS LOOKS LIKE

KEY ACTION IDEAS

**Strategic Objective: 7.1 Positive work environments and employee experience supporting a healthy workforce**

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>👣 We are proactive in preventing racism</li> <li>👣 We have zero tolerance to racism and always respond strongly to acknowledge and manage racism</li> <li>👣 Our staff has a deep understanding of Aboriginal cultures and intergenerational trauma and facilitate positive engagement and a safer experience for Aboriginal people</li> <li>👣 All staff understand, respect and value the roles, expertise and capabilities of Aboriginal workers</li> <li>👣 Aboriginal team members feel empowered to share cultural knowledge</li> <li>👣 We offer a range of supports to Aboriginal and non-Aboriginal team members including cultural mentoring, debriefing opportunities and peer support</li> </ul> | <ul style="list-style-type: none"> <li>👣 Regularly review Respecting the Difference training and evaluating its effectiveness in building competence and cultural safety over time</li> <li>👣 Ensure expectations of cultural respect and safety requirements are included in tenders, contracts and agreements with students</li> <li>👣 Develop a protocol for managing reports of Aboriginal staff or other Aboriginal people experiencing racism that is culturally safe</li> </ul> |
|---|--|

**Strategic Objective: 7.2 Effective workforce planning, recruitment and retention to meet our service needs**

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>👣 We have a good representation of Aboriginal staff members in each of our services</li> <li>👣 We consider the need for access to Aboriginal staff members outside of normal business hours</li> <li>👣 Our recruitment processes are easy to navigate, culturally safe and attract Aboriginal employees</li> <li>👣 We identify areas of high turnover of Aboriginal staff and determine actions to enhance cultural safety and job satisfaction</li> <li>👣 We take opportunities to work with ACCHS and education and training partners on workforce planning and to growing the Aboriginal workforce</li> </ul> | <ul style="list-style-type: none"> <li>👣 Promote employment opportunities in health at Aboriginal cultural events in the community</li> <li>👣 Review recruitment systems and processes for cultural safety and appropriateness</li> <li>👣 Consider strategies to retain our existing Aboriginal workforce</li> </ul> |
|---|--|

**Focus Area 7**

As Aboriginal team members, we hear from our communities about how important it is for our people to be supported by an Aboriginal worker when using health services.

We need more Aboriginal people working alongside us and need to create more permanent Aboriginal employment opportunities in all our services.

It is important for us to feel that our roles and knowledge are respected and valued and that everyone understands what we can contribute. We want our workplace to be culturally safe and free of racism. We want our concerns around racism to be treated seriously and everyone to understand how harmful it can be to our emotional and physical health and wellbeing.

We aspire to be leaders and want to be supported to achieve our full potential.





WHAT SUCCESS LOOKS LIKE

KEY ACTION IDEAS

## Our District Responsibilities

- Provide a work environment that is culturally safe and supportive for Aboriginal people.
- Plan for and adopt strategies that attract and retain Aboriginal staff and ensure we have culturally safe recruitment practices.
- Ensure our workforce reflects the communities we service and includes sufficient Aboriginal team members in all service areas.
- Develop the skills, capabilities, and career opportunities of our Aboriginal team members.
- Develop the cultural capability of all team members.
- Provide strong leadership that drives our commitment to improving Aboriginal health and wellbeing.

## Making it happen

What actions do you need to prioritise in the next 12 months to meet your responsibilities and contribute to building our people, culture and capability for a health service that is culturally safe and respectful of all Aboriginal people?

“Seeing our senior leaders walk-the-walk and talk-the-talk gives us hope that together, we will achieve real change and better outcomes for Aboriginal people.” (Consultation comment)

## Strategic Alignment

National Agreement on Closing the Gap: Priority Reform 3, National Aboriginal and Torres Strait Islander Health Plan: Priority Area 3 and 8, NSW Aboriginal Health Plan: Priority Area 3 and Strategic Directions 1 and 5, MNCLHD Strategic Plan 2022-2032: Focus Area 8.

### Strategic Objective: 7.3 A diverse workforce that reflects our communities

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|--|---|
| <ul style="list-style-type: none"> <li>● Aboriginal employees have a critical role in delivering culturally safe services and have a central place in providing leadership and guidance to ensure we meet the needs of our Aboriginal community</li> <li>● We have specific targets to ensure proportional representation of Aboriginal team members across all parts of our organisation to reflect our Aboriginal community</li> <li>● We acknowledge, value and celebrate Aboriginal culture, communities and team members</li> </ul> | <ul style="list-style-type: none"> <li>● Increase opportunities for cadetships, traineeships, internships and student placements for Aboriginal team members</li> </ul> |
|--|---|

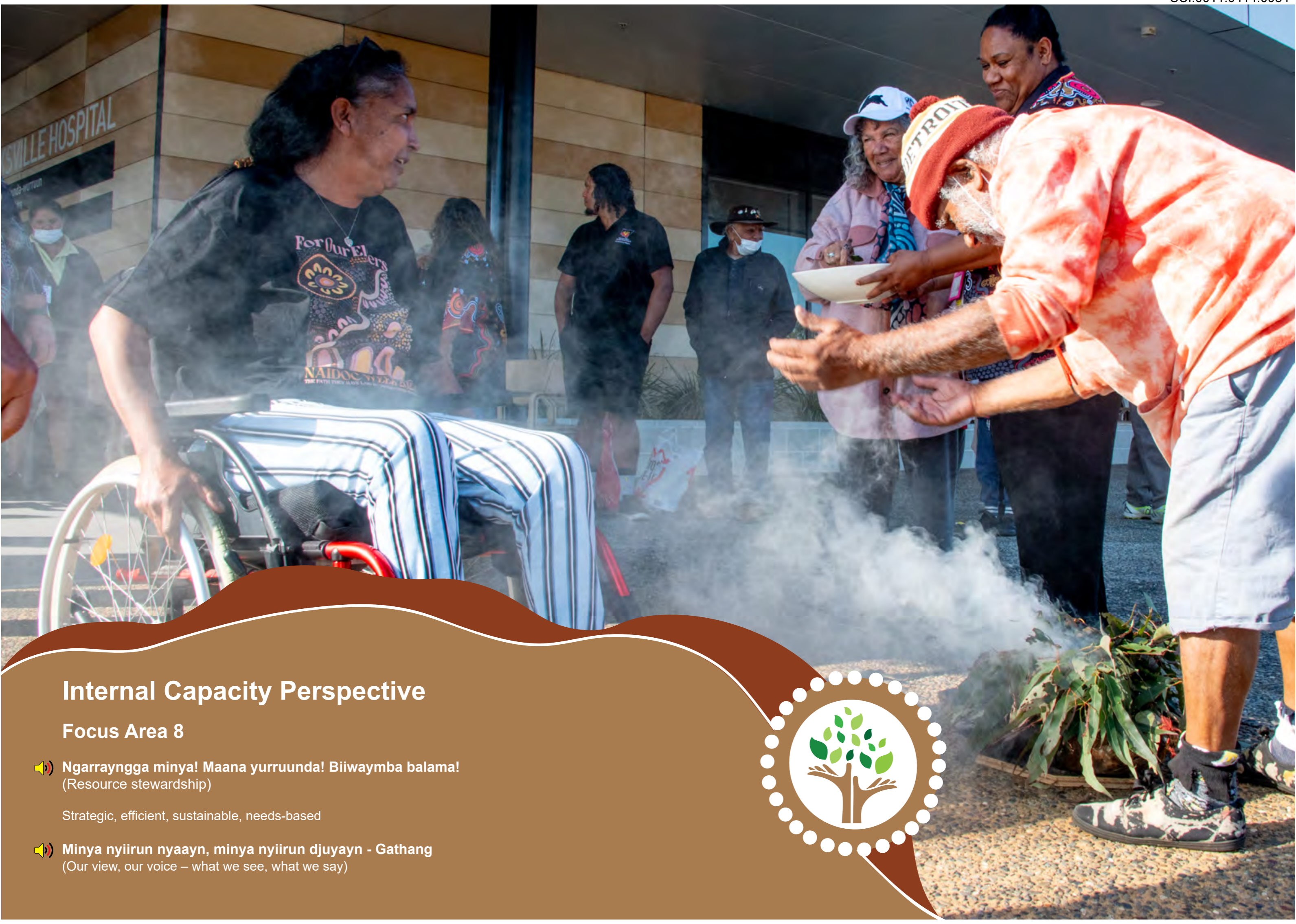
### Strategic Objective: 7.4 Highly qualified and capable workforce

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>● The expertise and cultural knowledge of Aboriginal employees is a valuable resource</li> <li>● All team members participate in cultural respect and cultural safety training and have opportunities for ongoing development of their cultural competencies</li> <li>● We ensure all Aboriginal team members have regular access to education, training and professional development</li> <li>● We provide Aboriginal staff opportunities and support to be seconded or appointed into positions that develop broader skills and knowledge and/or career progression</li> <li>● We work with ACCHS to jointly develop training programs for Aboriginal employees</li> <li>● We work with education partners to build pathways to health careers for Aboriginal people</li> </ul> | <ul style="list-style-type: none"> <li>● Enhance opportunities for Aboriginal employee networking and peer support</li> <li>● Develop a model of cultural mentoring/supervision</li> <li>● Develop a framework for cultural mentoring/supervision and support for Aboriginal employees</li> </ul> |
|--|---|

### Strategic Objective: 7.5 Effective, compassionate leadership and empowered teams

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|---|--|
| <ul style="list-style-type: none"> <li>● Leaders role model our commitment to improving Aboriginal health and always demonstrate cultural respect</li> <li>● Our leaders actively respond to instances of racism, work to prevent racism (individual and institutional) and strongly manage for cultural safety in our workplace</li> <li>● Our Aboriginal team members are engaged, empowered and supported to fulfill their full scope of practice</li> </ul> | <ul style="list-style-type: none"> <li>● Provide support for Aboriginal leaders across the organisation and support the development of emerging leaders</li> </ul> |
|---|--|





## Internal Capacity Perspective

### Focus Area 8

🔊 **Ngarrayngga minya! Maana yurruunda! Biiwaymba balama!**  
(Resource stewardship)

Strategic, efficient, sustainable, needs-based

🔊 **Minya nyiirun nyaayn, minya nyiirun djuyayn - Gathang**  
(Our view, our voice – what we see, what we say)







WHAT SUCCESS LOOKS LIKE

KEY ACTION IDEAS

## Focus Area 8

It is important to understand that we do not all have access to good internet in our homes and we need to be supported to access new online technology and care through other approaches.

There are many good programs that work for us. We are disappointed when they lose funding and stop.

It is good when health services have a space to gather for a yarn and support each other when using services. It is also great to see Aboriginal artwork and other ways the health service has worked to make services and buildings reflect our culture. We want to see more of this.

As Aboriginal team members, we want to be at the table to guide decisions that affect Aboriginal people.

### Strategic Objective: 8.1 Better access to technology that works for us

-  We have a strategic approach to digital health that includes consideration of how best to provide a personalised, culturally safe digital health journey
-  We ensure our technology and equipment are suitable and meet our service needs, including supporting and enabling community-based care (e.g., access to records and digital information in the field, on Country and in remote locations)
-  Our Aboriginal team members are tech-savvy and able to make the best use of available digital technologies
-  Facilitate and enable access to digital information and virtual care options for Aboriginal people

### Strategic Objective: 8.2 Strategic, equitable, timely transparent and efficient resource management

-  We prioritise and allocate resources to ensure we continue to tackle inequities in Aboriginal health and focus on sustained funding for services and programs that work
-  We identify and act on service provision gaps and provide resources to address these gaps
-  We are innovative and find ways to fund our Aboriginal health strategies, including taking opportunities for pooled funding, co-commissioning and contracting with our partners
-  We contribute proactively to support Aboriginal businesses through our procurement processes and decisions
-  Develop strategies for the sustainability of funding for Aboriginal health, especially for effective programs

### Strategic Objective: 8.3 Asset planning and management aligned to strategy

-  We provide culturally safe spaces, indoors and out, that support Aboriginal people and their families in their health care journey
-  We have creative ways of providing spaces and facilities in which to deliver care and programs to Aboriginal people, including opportunities for shared spaces with our partners, accessing existing spaces in the community, or mobile facilities and equipment
-  Our strategic asset planning includes specific consideration of the needs of Aboriginal people and we consult and involve Aboriginal community, partners and team members in service and facility planning
-  When selecting contractors, we carefully consider their commitment to employment and engagement of Aboriginal people
-  Support the development of Aboriginal community spaces and health care equipment. This may include construction, hiring, refurbishment, vans or other mobile resources, or other approaches







WHAT SUCCESS LOOKS LIKE

KEY ACTION IDEAS

**Strategic Objective: 8.4 Environmental sustainability is considered in everything we do**

-  We acknowledge and learn from the traditional owners of the land and recognise and respect their long history of caring for and protecting the land
-  We include Aboriginal people as we plan, implement and evaluate how we will achieve our goals for net zero emission, waste management and environmental sustainability
-  Provide opportunities for Aboriginal people to contribute to our work on environmental sustainability

**Strategic Objective: 8.5 Effective oversight and governance that aligns strategy and risk management**

-  Our LHD takes our responsibility and accountability seriously for our work on closing the gap, cultural safety and security across our organisation, effective engagement, shared decision-making and self-determination
-  Our Governing Board and senior leadership team ensure we maintain a strong focus and have clear priorities and strategies to address the needs of Aboriginal people
-  We have processes to embed cultural safety into all governance structures
-  We have Aboriginal representation across all important governance and management committees and representatives feel confident and safe to express their views
-  We have specific committees and meetings to drive important aspects of this Framework: those groups are appropriately aligned and have reporting in place to ensure the sharing of relevant information and decisions
-  We have a robust framework for reporting back to the Board, management and team members on this Framework and regularly discuss and review our progress
-  We are committed to full accountability to Aboriginal people and regularly report back to Aboriginal communities and partners on our strategies and progress
-  Develop a plan outlining how Aboriginal-specific committees and structures will be enhanced, aligned and connected to strengthen our ability to deliver on our goals
-  Review existing governance and management committees and enhance Aboriginal representation
-  Review reporting arrangements to strengthen accountability and drive ongoing improvements

## Our District Responsibilities

- Ensure our resource management, technology, assets and environmental decisions support our goals for improving Aboriginal health and wellbeing.
- Provide effective oversight to ensure we achieve our goals for Aboriginal health.
- Ensure we have culturally safe and effective governance systems and processes.

## Making it happen

What actions do you need to prioritise in the next 12 months to meet your responsibilities and contribute to better resource stewardship and governance to support all aspects of this Framework?

## Strategic Alignment

National Agreement on Closing the Gap: Priority Reform 3 and 4, National Aboriginal and Torres Strait Islander Health Plan: Priority Area 7 and 12, NSW Aboriginal Health Plan: Priority Area 5 and Strategic Direction 4, MNCLHD Strategic Plan 2022-2032: Focus Area 8.





# MNCLHD Aboriginal Health Strategic Framework Consultation

Consolidating feedback from consultations with staff, internal and external partners and Aboriginal community members

The development of the Aboriginal Strategic Framework 2024-2034 commenced early 2023. This involved consultation with internal and external partners, MNCLHD Aboriginal and non-Aboriginal staff and the broader community to collaborate and co-design a framework that aims to achieve better health outcomes for Aboriginal people of the Mid North Coast as well as to continue to work to Close the Gap between Aboriginal and non-Aboriginal people.

- Consultation sessions were conducted with the MNCLHD Aboriginal Health Leadership Collective, MNCLHD Aboriginal Health Forum, MNCLHD non-Aboriginal staff, internal and external partners and local Aboriginal community groups and individuals.
- The feedback gathered was essential to the development of the framework to ensure the Aboriginal voice.

- The feedback provided a guide to support all parts of the LHD to incorporate Aboriginal health into annual Operational Plans to ensure continued commitment, action, accountability and progress on Closing the Gap and improving the health and wellbeing of Aboriginal people living on the Mid North Coast.

## What we heard

Throughout the consultation process we heard recurring themes that were important to be considered and embedded into what we want to achieve in the next 10 years. We were reminded that Aboriginal health encompasses holistic wellbeing, not just physical but emotional, spiritual and ecological wellbeing.

The following are just some of the key themes that were repeated in all groups involved in the consultation.

### Awareness of and access to services

- Better awareness of services available and how to access them.
- Isolation, affordability and travel issues can hinder ability to get to services.
- Need for services to go to communities - similar to what happened throughout COVID-19.
- Culturally appropriate information that is accessible to Aboriginal people.
- Services that are culturally safe and easily accessible.
- Investment in models of care that effectively meet the needs of Aboriginal people.

### Addressing racism

- Racism experiences of staff, patients, visitors and community need to be taken seriously.
- Mistrust in services - negative experiences shared in community.
- Need for kindness and respect in action!
- Culturally appropriate complaint systems with adequate feedback loops.
- People are held accountable.
- Zero tolerance.

### Building the workforce

- Culturally safe work environment.
- Strategies to attract and retain Aboriginal staff.
- Career pathways and progression opportunities.
- Skills, capabilities and career opportunities as well as succession planning.
- Strong leadership to drive commitment to Aboriginal health and wellbeing.
- Effective oversight to ensure we achieve goals.
- Culturally safe and effective governance systems and processes.
- Future proofing to ensure growth of Aboriginal workforce.

### Partnerships and collaboration

- Partnerships are essential for progress.
- Effective partnerships needed with ACCHOs and other key partners.
- Interagency collaboration to affect real change.
- Working with elders and community to understand what is needed - collaborate and co-design programs that are effective.
- Supporting continuation of care, referral pathways and better outcomes for patients.

### Communication

- Progress updates - sharing success and challenges with partners and community.
- Communication to support health literacy.
- Improved internal and external communication via various communication channels.
- Sharing knowledge and evidence of what works in Aboriginal health and apply across services.

### A way forward

- Solution focus, strengths-based approach.
- Ensure Aboriginal people can participate in decision making.
- Demonstrate unwavering commitment, being proactive and achieving real progress in closing the gap.
- Deliver effective health protection, health promotion and early intervention programs and services to Aboriginal people.
- Incorporate cultural knowledge and approaches in everything we do.
- Deliver safe, effective, evidence based care that meets the needs of Aboriginal people.



# Glossary of Terms – Aboriginal Languages

The glossary table provides details on the Aboriginal Languages used throughout the document.

## Language group

## Phrase

**Gumbaynggirr**  
🔊

**Darrundaygirr darruyaygam, maabu-daariwaygam**  
Improving health feelings-being strong

**Girrwaanbigundi**  
of First People

### Acknowledgement of Country

**Ngiyalagay junga-ngarraynggi yaanga Birrbay,**  
We-> acknowledge these Birrbay,

**Janggadi, Gumbaynggirr gungangulam,**  
Dunghutti, Gumbaynggirr traditional custodians

**Yaanga wajaada juuda julundi yaam Mid North**  
these on lands where (parts that) the Mid North

**Coast Local Health ngayinggi**  
Coast Local Health sits.

### Acknowledgement of Country

**Nyiyanang dhupiyn.gan, ngarratiyn barri,**  
We understand, hear Country

**Gumbaynggirr-gutun, Birrbay-gutun, Dhanggati-gutun**  
Gumbaynggirr-belong Birpai-belong Dunghutti-belong

**Nga'angga barriya, MNCLHD nyinatiyn**  
These-on land-on MNCLHD sits.

### Acknowledgement of Country

**Nyiirun dhanbaan-ngarrayn barray Gumbaynggirrguba,**  
We acknowledge Country Gumbaynggirr-belong,

**Dhanggatiguba, Birrbayguba. Wuyinga barrayga,**  
Dunghutti-belong, Birpai-belong, these-on lands-on,

**MNCLHD yalawayn.**  
MNCLHD sits.

**Gumbaynggirr**  
🔊

**Dhanggati**  
🔊

**Gathang**  
🔊

## Language group

## Phrase

**Gumbaynggirr**  
🔊

### Aboriginal People's perspective of health

**Jirray Girrwaanbi-yu nyayagi darruyaygam-gundi.**  
What First People> see health-belong.

**Girrwaanbi-gundi darruyaygam yaam yirraay:**  
Aboriginal-belong health this means

**Biyagay buurrgi-girr wadanyundi darruyay,**  
not body-only of a person is well

**gala girrwa wumaagaw darruyay**  
but community whole is well

**gawbarrigam-ba, mabuula, guunu-warluunyja,**  
in society in emotions in culture

**yaamandi garlugun waarru wagin guuyuway-gi.**  
where one person completely mature-can.

**Yilaana yarranganga waadu wagin darrunday**  
thus these persons> totally fix

**girrwaagundi darruyaygam.**  
community well-being.

**Ngiyalagay yaam yirringin nyayagi: Yaam**  
we this thus see: this

**guunu-wumaagaw-gundi yaamandi yidaa**  
life-whole-belongs which always

**wanggalay gunuugu-waligamgu-gunuugu.**  
spins to life-to death-to life.

**Wutu marrunggan, gudhurrigan magiya,**  
Everybody wellbeing, strong-being body in,

**dhimbuyndha. Wunggatiyn waadhuga wutugu.**  
spirit-in. Working one-at all-for.













**Gumbaynggirr**  
🔊

**Dhanggati**  
🔊



# Glossary of Terms – Aboriginal Languages

The glossary table provides details on the Aboriginal Languages used throughout the document.

Language group	Phrase	Language group	Phrase
Gathang 	<p><b>Ngaanbiyn gagil marrung marinda, marrayga,</b> Everybody being well body-in, spirit-in,</p> <p><b>ngarralda. Nganbiyn duumuliliyn gagi</b> Knowledge in. Everybody care-REC-nom to.be</p> <p><b>ginyaanggang, marrunggang, dhanbaan.gang.</b> happy-INT, well-INT stong-INT</p>	Gumbaynggirr 	<p><b>Focus Area 3: Strong prevention and early intervention</b></p> <p><b>Gulambaygam daariway, darrundaygam gurrubal.</b> Blocked strongly, fixed quickly.</p>
Gumbaynggirr 	<p><b>Our view, our voice</b></p> <p><b>Minya ngiyaala nyayagi, minya ngiyaala juunyji.</b> What we&gt; see, what we&gt; tell.</p>	Gumbaynggirr 	<p><b>Focus Area 4: Partnering, collaboration, communication</b></p> <p><b>Ngalan-yanaaygam, ngalan-barriyaygam, gayirrigam.</b> Together-going together-working talking together.</p>
Dhanggati 	<p><b>Our view, our voice</b></p> <p><b>Miyang nyiyanang nhayan, miyang nyiyanang guuyan.</b> What we see, what we say.</p>	Gumbaynggirr 	<p><b>Focus Area 5: Streamlined processes that support safety and best practice</b></p> <p><b>Yaaway-gam nyarlaan, yaamandi ngalanambay daalbirrwirr,</b> Procedures smooth, which help safety (and),</p> <p><b>ngirraygam darruy-wunba.</b> actions best.</p>
Gathang 	<p><b>Our view, our voice</b></p> <p><b>Minya nyiirun nyaayn, minya nyiirun djuyayn.</b> What we see, what we say.</p>	Gumbaynggirr 	<p><b>Focus Area 6: Research, health intelligence, strategic management</b></p> <p><b>Ngaalgan.gundi jandaygam, darruyaygam-gundi miindal,</b> Mind-belong gathering, health-belong intelligence</p> <p><b>mangga-mayungigirr.</b> ahead-managing.</p>
Gumbaynggirr 	<p><b>Focus Area 1: Informed, engaged community</b></p> <p><b>Junga-junaaygam, ngarraangaygirr, balmuunambang,</b> Rightly-told listening strengthened</p> <p><b>girwaa-gundi.</b> community-belonging.</p>	Gumbaynggirr 	<p><b>Focus Area 7: People, culture and capability</b></p> <p><b>Waaruu-biin, guunu-warluuny, gulbul-ay-gam.</b> People culture being skillful.</p>
Gumbaynggirr 	<p><b>Focus Area 2: Positive and personalised care experiences</b></p> <p><b>Maabu-darrundaygam dugu-mabi.</b> Feelings-cared for up close.</p>	Gumbaynggirr 	<p><b>Focus Area 8: Resource stewardship</b></p> <p><b>Ngarrayngga minya! maana yurruunda! Biiwaymba balama!</b> Care for things hold for long empty out slowly.</p>





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